SCC eFile 2014 ANNUAL REPORT 214505683  COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION						
1.) CORPORATION NAME:				DUE DATE:	1/31/201/	
NORTH POINTE INSURAI	NCE COMPANY		DOL DATE.	1/31/2014		
2.) VA REGISTERED AGENT NAME AND OFFICE AL CT CORPORATION SYSTEM			SCC ID NO: <b>F1614363</b>		F1614363	
4701 COX ROAD, SUITE 285				5.) STOCK INFORMATION		
GLEN ALLEN, VA				CLASS	AUTHORIZED	
3.) CITY OR COUNTY OF VA HENRICO COUNTY	CE:		COMMON	50,000		
4.) STATE OR COUNTRY OF INCORPORATION: PA						
6.) PRINCIPAL OFFICE ADDR	RESS:					
ADDRESS: WALL STREET PLAZA 88 PINE STREET						
CITY/ST/ZIP: 1	NEW YORK, NY 100	05				
7.) DIRECTORS AND PRINCI	PAL OFFICERS:	All directors may be des	s and principal signated as bo	officers must t th a director ar	pe listed. An individual an officer.	
NAME			χ OFFIC	ER	X DIRECTOR	
NAME: TITLE:	David Duclos PRESIDENT					
ADDRESS:	WALL STREET 88 PINE STREE					
CITY/ST/ZIP/CO:	NEW YORK, N					
NAME			X OFFIC	ER	DIRECTOR	
NAME: TITLE:	Joanna Colane TREASURER	Joanna Colaneri TREASURER				
ADDRESS:	WALL STREET 88 PINE STREE	WALL STREET PLAZA				
CITY/ST/ZIP/CO:	NEW YORK, N					
NIANAT.			X OFFIC	ER	DIRECTOR	
NAME: TITLE:	JODIE L BURTI ASST SECRET					
ADDRESS: CITY/ST/ZIP/CO:		ONE GENERAL DRIVE				
CIT 1/31/2IF/CO.	SUN PRAIRIE,	WI 53596	X OFFIC	ED	DIRECTOR	
NAME:	PETER MALON	NEY	X OFFIC	LIX	BIRECTOR	
TITLE: ADDRESS:	SECRETARY WALL STREET	ΟΙ ΔΖΔ				
	88 PINE STREE					
CITY/ST/ZIP/CO:	NEW YORK, N	/ 10005			PURFOTOR	
NAME:	HARVEY BAZA	AAR	OFFIC	ER	X DIRECTOR	
TITLE:	DIRECTOR					
ADDRESS:	WALL STREET 88 PINE STREE					
CITY/ST/ZIP/CO:	NEW YORK, N	/ 10005				
NAME:	CHRISTOPHER	P DAVIES	OFFIC	ER	X DIRECTOR	
TITLE:	DIRECTOR					
ADDRESS: CITY/ST/ZIP/CO:		210 INTERSTATE N PARKWAY S.E. ATLANTA, GA 30339				

		OFFICER	X DIRECTOR		
NAME:	GREGORY DEAL				
TITLE:					
ADDRESS:	DIRECTOR				
	7333 SUNWOOD DRIVE				
CITY/ST/ZIP/CO:	RAMSEY, MN 55303				
		OFFICER	χ DIRECTOR		
NAME:	Marty Becker				
TITLE:	-				
ADDRESS:	DIRECTOR WALL STREET PLAZA				
ADDITESS.	-				
CITY/ST/ZIP/CO:	88 PINE STREET				
611 1/31/211 /60.	NEW YORK, NY 10005				
		OFFICER	χ DIRECTOR		
NAME:	Richard Dziadzio				
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
	1421/101010,141/10005				
		OFFICER	χ DIRECTOR		
NAME:	SUE HARNETT		<u> </u>		
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
	,	OFFICER	x DIRECTOR		
		OFFICER	X DIRECTOR		
NAME:	JOHN LANGIONE				
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
		OFFICER	X DIRECTOR		
NAME:	MARC METCALE				
TITLE:	MARC METCALF				
	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
CITY/ST/ZIP/CO:	88 PINE STREET				
611 1/31/211 /60.	NEW YORK, NY 10005				
		OFFICER	χ DIRECTOR		
NAME:	JOHN NEAL				
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
		OFFICER	X DIRECTOR		
NAME:	Jeff Grange				
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
		OFFICER	x DIRECTOR		
NIANAT.		OFFICER	X DIRECTOR		
NAME:	Truett Tate				
TITLE:	DIRECTOR				
ADDRESS:	WALL STREET PLAZA				
	88 PINE STREET				
CITY/ST/ZIP/CO:	NEW YORK, NY 10005				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND					
COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ JODIE L BURTNETT	JODIE L BURTNETT,	Δ99Τ	1/27/2014		
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SIGNATURE OF DIRECTOR/OFFICE LISTED IN THIS REPORT	PRINTED NAME AND	CODDODATE	DATE		
LIGILD IN THIS INC.	TITLE	OON ONATE			
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.